Maine Dept. of Health & Human Services SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION Division of Environmental Health, 11 SHS (207) 287-5672 FAX (207) 287-4172 PROPERTY LOCATION >> CAUTION: LPI APPROVAL REQUIRED << City, Town, Town/City L AMOINE or Plantation LAMOINE Date Permit Issued 6,5,17 Fee \$ 250 X Double Fee Charged () Street or Road RILEYS WAY Subdivision, Lot # Local Plumbing Inspector Signature OWNER/APPLICANT INFORMATION Name (last, first, MI) Owner FEE BIS, DO OWNER TOWN ☐ State WORKMAN, STEWART Applicant Mailing Address The Subsurface Wastewater Disposal System shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall 358 DOUGLAS HIGH WAY authorize the owner or installer to install the disposal system in accordance Owner □ Applicant with the application and the Maine Subsurface Wastewater Disposal Rules. LAMOINE ME. Daytime Tel. # Lot# 14-3A Municipal Tax Map# OWNER OR APPLICANT STATEMENT CAUTION: INSPECTION REQUIRED I state and acknowledge that the information submitted is correct to the best of I have inspected the installation authorized above and found it to be in compliance my knowledge and understand that any falsification is reason for the with Subsurface Wastewater Disposal Rules Application. Department and/or Local Plumbing Inspector to deny a permit. (1st Date Approved) Signature of Owner or Applicant Local Plumbing Inspector Signature (2nd Date Approved) PERMIT INFORMATION TYPE OF APPLICATION THIS APPLICATION REQUIRES DISPOSAL SYSTEM COMPONENT(S) 1. No Rule Variance 1. Complete Non-engineered System 1. First Time System 2. First Time System Variance 2. Primitive System (graywater & alt. toilet) 2. Replacement System a. Local Plumbing Inspector Approval 3. Alternative Toilet, specify: Type Replaced: b. State & Local Plumbing Inspector Approval 4. Non-engineered Treatment Tank (only) 3. Replacement System Variance 5. Holding Tank, ____ gallons Year Installed: a. Local Plumbing Inspector Approval 6. Non-engineered Disposal Field (only) 3. Expanded System b. State & Local Plumbing Inspector Approval 7. Separated Laundry System a. Minor Expansion 4. Minimum Lot Size Variance 8. Complete Engineered System(2000 gpd or more) D b. Major Expansion 5. Seasonal Conversion Permit 9. Engineered Treatment Tank (only) 4. Experimental System ☐ 10. Engineered Disposal Field (only) DISPOSAL SYSTEM TO SERVE 5. Seasonal Conversion 11. Pre-treatment, specify: ___ SIZE OF PROPERTY 🛮 1. Single Family Dwelling Unit, No. of Bedrooms: 3 12. Miscellaneous components TO BE sq. ft. 2. Multiple Family Dwelling , No. of Units: acres 3. Other: (SPECIFY) SHORELAND ZONING 1. Drilled Well 2. Dug Well 3. Private Current Use: Seasonal Year Round Undeveloped 4. Public [] 5. Other: Yes DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3) DESIGN FLOW 270 gallons per day TREATMENT TANK **DISPOSAL FIELD TYPE & SIZE** GARBAGE DISPOSAL UNIT 1. Concrete 1. Stone Bed 2. Stone Trench BASED ON 1. Table 4A (dwelling unit(s) 2. Table 4C (other facilities) 8 3. Proprietary Device 15 END FEED CONCRETE CHAMBERS a. Regular If Yes or Maybe, specify one below: D b. Low Profile SHOW CALCULATIONS for other facilities a. Multi-compartment Tank a. Cluster Array 13 c. Linear 2. Plastic 🛛 b. _ ____Tanks in Series B b. Regular load 13 d. H-20 load 3. Other: C. Increase in Tank Capacity 4. Other: 1000 d. Filter on Tank Outlet CAPACITY gallons 🗖 sq. ft. 📮 lin. ft. SIZE SOIL DATA & DESIGN CLASS EFFLUENT/EJECTOR PUMP DISPOSAL FIELD SIZING 1. Not Required SET HOUSE 2. May be Required 3. Section 4G (meter readings) ATTACH WATER METER DATA PROFILE CONDITION 1. Medium -- 2.6 sq. ft./gpd LATTITUDE AND LONGITUDE at Center of Disposal Area ., Lat 44°d 30′ m 47.9 s Lon. 68°d 21′ m 47.6′s 2. Medium-Large - 3.3 sq. ft./gpd 3. Required at Observation Hole # □ 3. Large – 4.1 sq. ft./gpd Specify only for engineered systems 4. Extra Large - 5.0 sq. ft./gpd DOSE: OF MOST LIMITING SOIL FACTOR gallons if g.p.s., state margin of error

SITE EVALUATOR STATEMENT

Certify that on 4-24-17 (date) I completed a site evaluation on this property and state that the data reported are accurate an
that the proposed system is in compliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241).

Site Evaluator Signature

319

4-28-17

WILLIAM A. LaBELLE, JR.

SE# (207) 537 - 5900

Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.

Site Evaluator Name Printed

Telephone Number

labelleseptic@rivah.net E-mail Address

Page 1 of 3 HHE-200 Rev. 08/2015

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